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GENERAL HEADQUARTERS
SUPREME COMMANDER FOR THE ALLIED POWERS
Public Health and Welfare Section

ARMY
MEDICAL
JUN 19 1947
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W E E K L Y B U L L E T I N

For Period

18 May - 24 May

1947

Number 21

SECTION	I - Welfare
SECTION	II - Veterinary Affairs
SECTION	III - Dental Affairs
SECTION	IV - Supply
SECTION	V - Preventive Medicine
SECTION	VI - Social Security
SECTION	VII - Medical Service
SECTION	VIII - Consultants
SECTION	IX - Memoranda to Japanese Government

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SECTION I

WELFARE

Social Work Training

The fourth and last of a series of training conferences for welfare officers of local Military Government teams was held by the Military Government Section, Eighth Army, during the week of 19 May. This last training conference was attended by the Social Work Training Consultant of the Welfare Division. Subjects discussed during the week included organization of welfare administration in the Japanese government, public assistance and child welfare programs, the Japanese Red Cross Society and disaster planning.

Licensed Agencies for Relief in Asia (LARA)

Dr. G. Ernest Bott, representative of Church World Service, has been approved by SCAP as the third official representative of LARA.

The seventh and eighth overseas shipment of LARA relief supplies have arrived in Yokohama and consist of the following items:

USAT Aberdeen Victory (4 May 47)

Wheat Flour	80 tons
Clothing	<u>44</u> tons
Total	124 tons

President Madison (23 May 47)

Clothing	50 tons
Foodstuffs	50 tons
Soap	20 tons
Miscellaneous	<u>30</u> tons
Total	150 tons

Note: The amount of relief supplies now received by LARA, since their first overseas shipment, (received dockside at Yokohama on 30 Nov 46) totals 2222 tons.

SECTION II

VETERINARY AFFAIRS

Monthly Meat Inspection Report

Following is a summary of the monthly Meat Inspection Report for March 1947, submitted by the Ministry of Welfare.

	<u>Cattle</u>	<u>Calves</u>	<u>Sheep & Goats</u>	<u>Swine</u>	<u>Horses</u>
Number slaughtered	15,376	556	334	7,025	4,016
Condemned ante mortem	4	0	0	0	0
Condemned post mortem					
Total	13	3	0	2	6
Partial	322	18	0	7	234
Viscera	3,595	43	0	2,234	534

Monthly Dairy Inspection Report

Following is a summary of the monthly dairy inspection report for March 1947, submitted by the Ministry of Welfare.

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Special Milk

<u>Farm Inspections</u>	3
Samples examined	7
Over bacterial standards (50,000 per cc)	0
Under butterfat standards (3.3 percent)	0
<u>Plant Inspections</u>	5
Over bacterial standards (50,000 per cc)	0
Under butterfat standards (3.3 percent)	0

Ordinary Milk

<u>Farm Inspections</u>	6363
Samples examined	7937
Over bacterial standards (2,000,000 per cc)	280
Under butterfat standards (3.0 percent)	770
<u>Plant Inspections</u>	4197
Over bacterial standards (2,000,000 per cc)	147
Under butterfat standards (3.0 percent)	709

Goat Milk

<u>Farm Inspections</u>	30
Samples examined	54
Over bacterial standards (2,000,000 per cc)	5
Under butterfat standards (3.0 percent)	3

Weekly Animal Disease Report

The Ministry of Agriculture and Forestry (Bureau of Animal Industry) reported the following new outbreaks of disease during the period 18 - 24 May 1947:

<u>Prefecture</u>	<u>Disease</u>	<u>Number of Cases</u>
Kagoshima	Anthrax	1
Chiba	Swine Erysipelas	1

SECTION III

DENTAL AFFAIRS DIVISION

The value of dental materials manufactured for the month of April amounted to ¥2,788,291.38, and that of instruments to ¥3,659,297.30.

SECTION IV

SUPPLY

Distribution

The distribution of insect and rodent control equipment by the Welfare Ministry has begun, with emphasis placed on sprayers, knapsack type. Latest information (23 May 1947) shows the following shipments to prefectures were made, a total of 4,184 sprayers:

<u>Prefecture</u>	<u>Quantity Knapsack Sprayer</u>
Hokkaido	200
Aomori	160
Iwate	160

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Prefecture

Quantity Knapsack Sprayer

Miyagi	160
Akitu	160
Yamagata	160
Fukushima	160
Ibaraki	160
Tachigi	160
Gumma	160
Nigata	160
Toyama	160
Ishikama	160
Nagano	160
Yamanashi	160
Shizuoka	160
Hyogo	304
Saitama	160
Chiba	160
Ishikawa	160
Fukui	160
Shiga	160
Tottori	160
Hiroshima	160
Yamaguchi	160

Shipments are continuing and equipment is expected to reach all prefectures in the near future.

Pyrethrum emulsion for use in the insect control program is also being distributed, and, as of 21 May 1947, a total of 5,170 fifty-gallon drums has been shipped to the prefectures by the Welfare Ministry. Shipments have been made to all but three prefectures. Miyazaki Prefecture has not replied to Welfare Ministry request for shipping instructions. The cause for lack of shipments to Wakayama and Hiroshima Prefectures is being investigated by the Welfare Ministry. An outline of shipments made through 21 May 1947 follows:

Prefecture

Quantity 50-gal. drum

Hokkaido	50
Aomori	27
Iwate	45
Miyagi	90
Akita	80
Yamagata	30
Fukushima	76
Ibaraki	77
Tochigi	25
Gumma	50
Saitama	174
Chiba	188
Tokyo	741
Kanagawa	240
Niigata	80
Toyama	42
Ishikawa	80
Fukui	40
Yamanashi	20
Nagano	46
Gifu	35
Shizuoka	45
Aichi	80
Mie	105
Shiga	50
Kyoto	427
Osaka	411
Hyogo	430
Nara	15
Tottori	55

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<u>Prefecture</u>	<u>Quantity 50-gal. drum</u>
Shimane	15
Okayama	120
Yamaguchi	162
Tokushima	61
Kagawa	80
Ehime	182
Kochi	67
Fukuoka	198
Saga	70
Nagasaki	120
Kumamoto	45
Oita	120
Kagoshima	75

Production

Production of DDT Dusters and Spraying Equipment increased satisfactorily for the manufacturing period of 10 - 20 May. Actual production accomplished was as follows:

DDT Dusters	1,000
° Sprayer, knapsack type, 3 gallon	360
Sprayer, pump type, semi-automatic	340

The temporary shortage of brass plate and brass pipe necessary for the manufacture of the sprayer, knapsack type, 3 gallon, has been relieved. Production, for this reporting period, was increased to 360 as compared to the previous reporting period's production of only 43 sprayers during the brass shortage.

The following releases of DDT products and typhus vaccine were approved by Welfare Ministry during period 19 - 24 May:

<u>Prefecture</u>	<u>10% DDT Dust</u>	<u>5% DDT Spray</u>	<u>Typhus Vaccine</u>
Kochi	3,750 lbs.	580 gals.	135 vials
Osaka	8,000 lbs.	2,000 gals.	
Gifu	3,200 lbs.	500 gals.	
Miyazaki	10,000 lbs.		
Hiroshima	3,000 lbs.	500 gals.	
Fukuoka	800 lbs.	100 gals.	40 vials
Shimane	24,000 lbs.		
Totals	52,750 lbs.	3,680 gals.	175 vials

Total stocks now in depots, factories and intransit are as follows:

10% DDT Dust	2,240,911 lbs.
5% DDT Residual Effect Spray	248,180 gals.
Typhus Vaccine	81,218 vials

The program of the production of pyrethrum emulsion, to be diluted with three parts of water prior to spraying, for mosquito and fly control activities during 1947, has progressed satisfactorily since its initiation last year. Welfare Ministry reports, for the period up to 10 May, production of pyrethrum emulsion as follows:

	<u>50 gal. drums</u>	<u>Gallons</u>
Estimated Production for year 1947	17,000	850,000
Total Production to date (10 May)	7,503	375,150
Total amounts shipped	3,386	169,300

Total amount of pyrethrum flowers received was 556,083.94 kgs.

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Narcotics

A recent inspection trip through Central Honshu showed that hospitals are cooperating with the program of Narcotic Control efforts to eliminate thefts of narcotic stocks by storing their supply in regulation steel safes. This will also prevent loss of narcotics by fire. Narcotic stocks in some hospitals and local wholesalers were found to be depleted and in some instances this has been occasioned by the inability of Central Wholesalers to fill requisitions that are submitted on order forms. An investigation of these Central Wholesalers revealed that they have not maintained their stocks at a sufficient level and corrective action has been taken through conferences with the wholesalers and through instructions issued to the Welfare Ministry. Central wholesalers, by purchasing from registered producers, must keep their stocks representative and sufficient to meet requirements without any further instructions from the Japanese Government.

In order to place proper emphasis on narcotic enforcement by regularly appointed narcotic agents, the Narcotic Section, Ministry of Welfare, has been advised to require the following monthly reports from prefectural agents:

1. Number of inspections made.
2. Number of investigations begun.
3. Number of investigations being carried on.
4. Number of investigations completed.
5. Estimated number of violations.
6. Extent of illicit traffic.
7. General estimate of narcotic conditions.

- a. Poor
- b. Fair
- c. Good
- d. Very good

8. Prices of illicit narcotics.

- a. Opium per kilogram
- b. Morphine per gram
- c. Heroin per gram
- d. Cocaine per gram

A consolidated report from the above information will be completed by the Narcotic Section and forwarded to the Narcotic Control Branch so that proper evaluation of narcotic enforcement can be made.

As a further step to stop the introduction of narcotics into Japan by repatriates, the Ministry of Justice has been advised to inform all procurators that all persons involved in smuggling operations are to be prosecuted and heavy penalties demanded. This applies not only to repatriates but to any person entering or leaving Japan illegally with narcotics.

The order granting police power for narcotic offenses to narcotic agents should become effective within approximately two weeks. The Ministry of Justice and the Ministry of Welfare will issue instructions that such authority is to be granted only to regularly appointed narcotic agents who have no duties other than narcotic enforcement. It is not anticipated that there will be any exceptions to this provision.

A Korean living in Hachioji, Tokyo Prefecture, was apprehended for cultivation of opium poppies. Ninety-five plants were being cultivated and the case is being prepared for the local procurator. It was learned that such cultivation has been carried on by the Korean for the past two years. Military Government Teams should assure that narcotic agents and police make every effort to enforce the SCAP Directive and Japanese narcotic laws which prohibit the cultivation of opium poppies.

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SECTION V

PREVENTIVE MEDICINE DIVISION

Typhus Fever

Comparative Score: (includes figures of 23 May)

1946 - 816

1947 - 27,685

Summary of results of complement fixation tests:

The following table is a summary of the results performed to date on blood samples submitted to the 406th Med. General Laboratory. Other samples are under test. Detailed reports have been sent out to prefectures concerned. Some blood samples received have been badly haemolyzed through faulty technique in collection thus nullifying the efforts made in collecting and shipping. Blood samples received from Shikoku show the need for improvement in technique.

The column headed "Indeterminate" indicates samples in which the differentiation between Murine and epidemic typhus was not possible. This may mean that an "intermediate" form of typhus exists.

	Blood Samples Tested	<u>Complement Fixation</u>				Anti- comple- mentary
		<u>Epidemic</u>	<u>Murine</u>	<u>Indeterminate</u>	<u>Negative</u>	
Hokkaido	25	22	0	0	3	
Miyagi	7	5	0	0	2	
Fukushima	1	1	0	0	0	
Tochigi	3	1	0	0	2	
Ibaragi	30	1	9	6	13	1
Saitama	11	0	8	2	1	
Chiba	6	1	3	0	2	
Tokyo	57	4	14	11	27	1
Ishikawa	6	0	5	1	0	
Gifu	5	0	3	0	2	
Shizuoka	49	1	31	9	8	
Fukui	8	0	3	4	1	
Aichi	79	0	48	12	18	1
Mie	5	0	3	2	0	
Nara	1	0	0	1	0	
Osaka	23	0	17	6	0	
Nyogo	36	2	21	4	6	3
Yamaguchi	9	0	5	3	1	
Total	361	38	170	61	86	6

Typhus Fever

Summary of results of complement fixation tests.

We are anxious to complete tests on all suspect cases reported since 1 September 1946. Send in blood samples (at least 10cc) from your suspect cases as soon as possible. We are especially interested in receiving blood samples from reported cases of "Takamatsu Fever" from Shikoku.

Cholera Control

During 1946 there were reported 1229 cases of Cholera in Japan. This does not include cases that originated on repatriation ships while enroute to Japan or while in quarantine in reception ports. Most of these cases resulted from persons entering the country illegally through smuggling and illicit shipping from Korea and to a lesser extent from repatriation. There have been no cases of Cholera reported in Japan during the current calendar year. Nevertheless, this disease is ever present on the Asiatic mainland and constitutes a continual threat to Japan.

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Quarantine services and other public health agencies did a splendid job last year of preventing the spread of the disease in Japan. The Cholera season is at hand and Military Government and Quarantine officers are urged to keep a close watch for suspects and to take appropriate steps to effect control.

Prefectural health personnel should be alerted for possible Cholera outbreaks by making provisions for vaccines, and isolation measures.

Venereal Disease Control

Contact reports indicate that in some areas excellent results are being obtained by the contact tracing facilities initiated by the Military Government Health Officer. In marked contrast to these prefectures, reports from other areas indicate that contact tracing is not receiving the serious attention of the civilian agencies responsible for this work.

Contact tracing is a new concept to Japanese public health departments. It is strictly a health department function that will be of increasing importance as a modern V.D. control program is developed. Even now, health departments have the responsibility for finding as many cases of venereal disease as they can trace by epidemiologic methods.

The personnel of contact tracing teams will vary in different prefectures, but will usually consist of public health nurses or Health Department inspectors. It is essential that these individuals understand the basic principles of the communicability of venereal diseases and something of the diagnostic procedures used. Tact and a real interest in V.D. control are necessary and personnel should be selected with these qualities in mind. These workers are health department employees who are tracing persons possibly infected; they are not police who apprehend violators of the law.

Contacts of gonorrhea patients who are found and known to be promiscuous should be diagnosed clinically as having gonorrhea and treated, despite the absence of laboratory confirmation.

Every case that is found through contact tracing and treated may be the means of preventing many other cases.

Sanitation - Insect Control

Inventory should be made weekly of insecticides, and equipment on hand, and the number of control teams actually working. Spot investigations should be made periodically to determine the effectiveness of control measures. Local laws and regulations designed to prevent individuals from committing nuisances should be looked up and published. Routine inspections must be made by sanitary inspectors in order to uncover violations of these regulations and effect corrections.

The individual must be taught the fundamentals of fly and mosquito control, and what part he must play in community control. If it is to be successful, an insect control program must have good cooperation of the individual, the regular agencies that carry on garbage and night soil collection, and auxiliary agencies carrying out measures directed against specific problems, such as the sanitary teams being operated under the direction of the Health Department.

Laboratory Control

Reference is made to Sec. VI, Public Health & Welfare Weekly Bulletin #16 dated 13-19 April 1947. RE: National Institute of Health:

Formal dedication exercises were held for the new National Institute of Health (NIH) at Shiba Ku in Tokyo. This was the culmination of five months of conferences and intensive negotiations between SCAP and the Welfare and Education Ministries of the Japanese Government.

The formal dedication exercises marked the beginning of an official governmental organization designed and dedicated to promote the national public health by controlling the production and assay of biologic products and conducting research on diseases and other problems affecting the public health.

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The organization functions and aims of the new National Institute of Health are patterned after those of the National Institute of Health in the United States. The birth of the National Institute of Health is one of the major achievements in the promotion of public health in Japan.

The new National Institute of Health will be under the jurisdiction of the Minister of Health and Welfare; however, it will enjoy freedom from political interference. It will be a relatively independent agency with an extremely wide range of latitude as regards the scope of its activities. These matters will be decided upon by the scientific director and his staff.

BCG Vaccine

In 1908 Albert Calmette and Alphonse Guérin reported the development of a strain of bovine tubercle bacilli which had lost its virulence by being passed through a long series of subcultures grown on glycerinated ox-bile media. In 1920, these scientists reported that the BCG culture was harmless to man and began the vaccination of newborn infants by feeding them the vaccine by mouth.

Since 1921, millions of vaccinations have been done, particularly in Europe and South America, and in the United States careful studies were made; but the use of the vaccine was not widely adopted. In 1930 Dr. Johannes Holm began his studies in Denmark, and since 1932, that country has used BCG vaccine extensively and feel that it is quite safe, and when carried out properly, few complications arise. In Japan BCG vaccine was developed from a strain given to Dr. Shiga in 1925 by Dr. Calmette, and since then, that strain has been maintained in the Government Institute of Infectious Diseases.

In 1933, the study of BCG vaccine was begun under the direction of the late Mr. M. Nagayo, succeeded by Dr. T. Kumagaya. This work was done on an experimental basis by the Anti-Tuberculosis Association and in the various universities. It was not until 1944 that the Japanese Government assumed charge of BCG vaccination programs and carried them out on a national scale. In 1944, the Government supervised the vaccination of 5,025,794; in 1945, 8,671,611; in 1946 approximately 6,242,710 individuals, with negative tuberculin reactions, were vaccinated with BCG vaccine. The Japanese reporting in the past left much to be desired and was inadequate in its follow-up. Consequently, much study is yet necessary before the effect of BCG vaccination can be truly evaluated in Japan.

Professional Medical Journals

Public Health and Welfare Section, SCAP, recognizes the need for professional journals for the use of Military Government Public Health Officers and other technical medical personnel. Efforts were made to obtain subscriptions for a basic list of medical periodicals for each Military Government Team. Sufficient copies of the following journals are being received to supply one copy of each journal to each Regional Headquarters in Japan for circulation among the teams of the Region.

- *American Journal of Public Health and the Nation's Health
- *Journal of the American Medical Association
- *Annals of Internal Medicine
- Journal of Infectious Diseases
- Public Health Reports
- Veneral Disease Information
- *New England Journal of Medicine
- American Journal of Syphilis, Gonorrhea and Venereal Diseases
- American Journal of Nursing
- Water and Sewage Works Journal

*Journals marked with an asterisk are now being received by Public Health and Welfare Section, SCAP, and are being forwarded to Regional Headquarters for circulation within each region in Japan. The remaining Journals will be forwarded to each Region and District Headquarters upon receipt. Journals which have been received during the month will be forwarded to Regional and District

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Headquarters periodically about once each month. Military Government Health and Welfare personnel will find these periodicals of inestimable value in the prosecution of their health programs.

SECTION VI

SOCIAL SECURITY DIVISION

Social Insurances

Mr. William H. Wandel, has been assigned as Chief, Social Security Division, Public Health and Welfare Section, SCAP, on loan from the Federal Security Agency, Washington, D. C.

All prefectural insurance officers met in Tokyo on 21 - 22 May for an orientation and instructional conference for the promulgation of the Workers Accident Compensation Insurance Law. Principal points discussed were, the medical fee costs; coordination with the Labor Standards Law; procedure for appeals; participation of employees in general policies and employers responsibility.

With the enactment of the Workmens Accident Compensation Law to be effective as of 1 July 1947, the Employer's Liability Accident Insurance System becomes inoperative and some disposition will be made of the reserve funds approximating ¥22,800,000 as of March 1946 accumulated under the latter law. The Ministry of Welfare is to submit a plan for the allocation of the fund to other social insurance programs.

The Insurance Bureau of the Ministry of Welfare conducted as of 21 May a sample survey encompassing questionnaires to be answered by 163,000 individuals distributed in 15 prefectures and 4,728 concerns from all parts of Japan. The survey was expected to give pertinent data relative to the employment and unemployment situation for possible use in formulating an unemployment compensation program. The results of the survey and conclusions reached will be submitted to the Social Security Division when available.

Health Insurance

In addition to the health benefits provided by the five major programs in the Japanese social insurance system, and by the Postal Insurance program, each of the 13 ministries in the Japanese Government independently operates on behalf of its employees one or more mutual aid associations, one of the main functions of which is to offer protection against the costs and losses of illness.

The result is an extremely complicated system of health insurance coverage, with numerous ordinances, rules and regulations governing the activities of the component parts. It is difficult to find a Japanese official who is thoroughly familiar with all the ramifications of the numerous health insurances. The man on the street, for the most part, is ignorant of the rights and privileges to which he is eligible.

The Japanese Government has been urged to unify these several health benefit programs into a comprehensive national health insurance system.

The first step in this direction has been the achievement of an agreement to place the activities and records of the various Governmental mutual aid associations, mentioned above, under the supervision of the Bureau of Social Insurance in the Ministry of Welfare. Prior to this agreement the Finance Ministry and the Transportation Ministry had insisted on retaining independent control.

SECTION VII

MEDICAL SERVICE

Japanese Civilian Hospital Strength Report for the period ending 4 April 1947 shows 3177 hospitals with a capacity of 220,740 beds, 103,905 of which were occupied. During this same period 337,956 out-patients were treated.

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SECTION VIII

CONSULTANTS

NUTRITION

Conferences were held with representatives of the Ministry of Agriculture (Ration Board) and Ministry of Welfare with regard to the problem of the preparation of imported foods such as green peas, soy flour, milo and soap powder in Japanese homes.

Plans were made to study methods of preparation. It was recommended that nutritionists in the Sanitary Bureaus of cities and prefectures advise the populace how to prepare these foods.

SECTION IX

MEMORANDA TO JAPANESE GOVERNMENT

PHMJG-20 20 May 1947 Publication of Results of Nutrition Surveys of Civilian Population for November 1946.

Crawford F. Sams

CRAWFORD F. SAMS,
Colonel, Medical Corps,
Chief, Public Health and Welfare Section

1 Incl:

1. Weekly Summary Report of Cases and Deaths from Communicable Diseases in Japan, week ending 17 May 1947 w/digest.

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Digest of Weekly Summary Report of Communicable
Diseases for the Week ending 17 May 1947

The reportable communicable diseases which accounted for the most cases during the week ending 17 May 1947 were tuberculosis (8,600), measles (8,570), pneumonia (5,846), whooping cough (4,845), diphtheria (679), typhoid (359), influenza (327), malaria (238), dysentery (198), epidemic meningitis (127), and scarlet fever (124). Due to a misunderstanding of instructions, there were no reports received from 28 prefectures on deaths from measles, whooping cough, tuberculosis, pneumonia and influenza. Of the remaining reportable diseases, those which accounted for the highest number of deaths were diphtheria (56), epidemic meningitis (49), dysentery (38) and typhoid fever (36).

There was a slight decrease in the incidence of diphtheria from 722 cases to 679 in the current week. Diphtheria cases were well below the number (912) reported for the corresponding week of 1946. Deaths were 56 in the current week compared with 53 in the preceding week. The current and cumulative case rates were 48.4 and 49.3 respectively. Corresponding death rates were 4.0 and 4.7.

Dysentery continued its upward trend. Cases (198) showed an increase of approximately 11 percent over the cases (178) in the previous week. Deaths increased from 33 to 38. The current and cumulative case rates were 14.1 and 5.9 respectively. The corresponding death rates were 2.7 and 1.2.

Typhoid fever cases (359) increased nearly 50 percent from 242 in the preceding week to reach a new high for the year. The current number, however, is just a little more than half the number of cases (640) reported in the corresponding week of 1946. Deaths increased from 30 to 36. The current and cumulative case rates were 25.6 and 15.0 respectively. Corresponding death rates were 2.6 and 2.0.

Paratyphoid fever cases increased more than 60 percent from 52 in the previous week to 84 currently. Deaths decreased from 6 to 2. Current and cumulative case rates were 6.0 and 3.8 respectively. Corresponding death rates were 0.1 and 0.2.

Smallpox cases (23) were slightly less than in the preceding week (25). There were 9 cases reported in Fukuoka Prefecture compared with 13 in the previous week. There were no deaths reported. Current and cumulative case rates were 1.6 and 1.1 respectively. The cumulative death rate was 0.1.

Typhus fever cases remained about the same with 23 cases reported currently compared with 20 in the preceding week. Deaths rose from 2 to 8. Current and cumulative case rates were 1.6 and 2.5 respectively. Corresponding death rates were 0.6 and 0.2.

Malaria cases (238) increased approximately 18 percent from 202 cases in the preceding week. There were no deaths reported. The current and cumulative case rates were 17.0 and 12.5 respectively. The cumulative death rate was 0.05.

The current number of scarlet fever cases (124) was more than 60 percent higher than the number (74) in the previous week. Only 2 deaths were reported. Current and cumulative case rates were 8.8 and 3.7 respectively. Corresponding death rates were both 0.1.

There was a 10 percent increase in the incidence of epidemic meningitis from 115 cases previously to 127 currently.

Deaths decreased approximately 15 percent from 58 to 49. The current and cumulative case rates were 9.1 and 7.2 respectively. Corresponding death rates were 3.5 and 2.1.

There continued to be no Japanese B encephalitis, cholera, or plague.

The current and cumulative numbers of cases reported for chancroid were 996 and 15,997 respectively; for gonorrhea 5,380 and 73,424; for syphilis 3,395 and 49,713.

SUMMARY REPORT OF CASES AND DEATHS FROM
COMMUNICABLE DISEASES IN JAPAN
WEEK ENDING 17 MAY 1947

PREFECTURE	DIPHTHERIA				DYSENTERY			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	59	6	1263	162	11	1	113	22
AOMORI	6	-	180	21	-	-	16	5
IWATE	11	-	184	20	2	1	34	2
MIYAGI	14	-	212	10	-	-	21	2
AKITA	10	1	233	20	2	-	16	2
YAMAGATA	10	1	355	25	5	-	65	10
FUKUSHIMA	14	1	221	6	3	-	65	9
IBARAKI	13	-	259	26	9	4	60	18
TOCHIGI	20	1	291	25	-	-	43	14
GUMMA	6	-	153	33	9	1	42	6
SAITAMA	15	2	301	35	4	2	37	11
CHIBA	4	-	263	21	2	-	40	8
TOKYO	25	6	912	162	21	7	205	52
KANAGAWA	15	1	302	23	9	4	48	13
NIIGATA	14	1	245	23	10	-	62	7
TOYAMA	5	-	119	9	-	-	10	2
ISHIKAWA	18	1	257	7	1	-	9	1
FUKUI	9	-	114	5	-	-	10	4
YAMANASHI	1	-	49	2	1	-	10	1
NAGANO	22	1	321	25	1	1	27	4
GIFU	5	-	93	14	1	1	15	5
SHIZUOKA	19	3	280	35	3	1	35	9
AICHI	65	5	801	48	13	3	62	9
MIE	21	1	339	14	2	1	8	4
SHIGA	4	-	98	8	1	-	11	2
KYOTO	16	6	273	30	23	3	162	8
OSAKA	25	1	244	35	3	1	61	15
HYOGO	24	3	456	37	7	1	35	10
NARA	7	-	84	5	2	-	3	1
WAKAYAMA	3	-	108	5	-	-	5	2
TOTTORI	3	-	87	9	-	-	6	4
SHIMANE	18	-	207	13	2	-	11	4
OKAYAMA	5	1	199	19	6	-	18	3
HIROSHIMA	27	3	251	24	1	1	33	9
YAMAGUCHI	15	-	329	31	2	-	24	9
TOKUSHIMA	9	-	131	4	-	-	6	1
KAGAWA	3	-	120	9	3	1	31	7
EFUME	19	1	465	56	2	-	25	6
KOCHI	3	1	156	13	8	1	20	9
FUKUOKA	34	3	962	70	1	1	43	6
SAGA	10	1	456	41	1	-	17	3
NAGASAKI	10	-	313	36	2	1	22	8
KUMAMOTO	7	1	92	14	-	-	9	4
OITA	14	2	415	28	2	-	8	2
MIYAZAKI	12	1	304	21	22	1	53	4
KAGOSHIMA	10	1	321	46	1	-	10	4

TOTAL	679	56	13818	1325	198	38	1666	341
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RATE								
Current	48.4	4.0	49.3	4.7	14.1	2.7	5.9	1.2
Previous	51.5	3.8			12.7	2.4		

Rates per 100,000 per annum

Continued

PREFECTURE	TYPHOID				PARATYPHOID			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	6	2	195	40	2	-	30	5
AOMORI	1	-	43	12	1	-	5	-
IWATE	-	1	47	9	-	-	8	-
MIYAGI	3	1	115	12	16	-	42	4
AKITA	5	-	29	2	-	-	5	1
YAMAGATA	4	1	93	25	2	-	22	1
FUJUSHIMA	4	-	141	11	2	-	19	3
IBARAKI	4	1	121	17	2	-	41	4
TOCHIGI	7	-	90	16	-	-	16	2
GUMMA	1	-	52	10	-	-	19	1
SAITAMA	5	-	125	11	1	-	13	4
CHIBA	4	-	115	9	-	-	33	1
TOKYO	30	2	328	42	13	-	139	7
KANAGAWA	19	3	203	27	5	-	30	2
NIIGATA	2	-	86	19	-	-	27	1
TOYAMA	6	1	79	11	1	-	13	-
ISHIKAWA	1	2	18	3	1	-	7	-
FUKUI	2	-	36	3	1	-	9	-
YAMANASHI	-	-	21	-	-	-	7	-
NAGANO	3	-	80	12	3	-	37	3
GIFU	10	1	108	12	4	-	28	1
SHIZUOKA	11	1	160	11	-	1	39	1
AICHI	11	2	186	17	2	-	43	1
RIE	128	2	246	12	2	-	31	3
SHIGA	1	-	25	4	1	-	4	-
KYOTO	6	3	99	16	-	-	20	2
OSAKA	15	3	96	15	9	1	160	3
HYOGO	4	1	156	31	-	-	12	1
NARA	2	-	32	6	2	-	4	-
WAKAYAMA	4	-	63	7	-	-	1	-
TOTTORI	4	-	48	4	5	-	7	-
SHIMANE	10	3	83	15	2	-	24	-
OKAYAMA	-	-	98	13	-	-	5	-
HIROSHIMA	7	1	194	19	2	-	40	3
YAMAGUCHI	1	1	47	6	2	-	10	-
TOKUSHIMA	3	-	61	10	-	-	6	2
KAGAWA	2	-	52	13	-	-	15	-
EHIME	4	-	42	7	-	-	3	-
KOCHI	9	2	124	17	1	-	13	-
FUKUOKA	11	1	132	10	2	-	28	2
SAGA	1	-	30	1	-	-	9	1
NAGASAKI	-	-	19	-	-	-	8	1
KUMAMOTO	2	-	30	2	-	-	7	-
OITA	2	-	15	-	-	-	2	-
MIYAZAKI	3	1	45	7	-	-	13	2
KAGOSHIMA	1	-	12	5	-	-	1	-

TOTAL	359	36	4220	551	84	2	1055	62
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RARE

Current	25.6	2.6	15.0	2.0	6.0	0.1	3.8	0.2
Previous	17.3	2.1			3.7	0.4		

Rates per 100,000 per annum

Continued

Rates per 100,000 per annum

Weekly Report - 17 May 1947
Continued

[illegible]

Weekly Report - 17 May 1947

Continued

PREFECTURE	SCARLET FEVER				EPIDEMIC MENINGITIS				JAP. B. ENCEPHALITIS			
	Current		Cumulative		Current		Cumulative		Current		Cumulative	
	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)	(C)	(D)
HOKKAIDO	8	-	135	5	16	1	225	61	-	-	-	-
AOMORI	-	-	8	1	2	-	53	8	-	-	-	-
IWATE	3	-	12	3	-	-	42	15	-	-	-	-
MIYAGI	-	-	24	-	1	-	64	8	-	-	-	-
AKITA	-	-	16	1	2	1	54	26	-	-	-	-
YAMAGATA	2	-	13	-	5	4	45	11	-	-	-	-
FUKUSHIMA	2	-	18	1	7	-	88	19	-	-	-	-
IBARAKI	1	-	17	1	8	3	128	42	-	-	-	-
TOCHIGI	6	-	11	-	1	-	14	7	-	-	-	-
GUMMA	1	-	14	-	-	-	25	6	-	-	-	-
SAITAMA	1	-	21	-	1	-	49	17	-	-	-	-
CHIBA	1	-	15	-	1	1	41	15	-	-	-	-
TOKYO	13	2	199	4	22	16	474	176	-	-	-	-
KANAGAWA	5	-	55	-	5	1	43	12	-	-	-	-
NIIGATA	-	-	5	-	4	1	34	6	-	-	-	-
TOYAMA	-	-	7	-	-	-	10	-	-	-	-	-
ISHIKAWA	-	-	4	1	1	-	30	8	-	-	-	-
FUKUI	2	-	3	-	-	-	7	3	-	-	-	-
YAMANASHI	3	-	14	-	2	-	24	1	-	-	-	-
NAGANO	1	-	26	1	1	-	31	4	-	-	-	-
GIFU	-	-	8	-	1	-	15	3	-	-	-	-
SHIZUOKA	55	-	74	-	6	3	64	15	-	-	-	-
AICHI	1	-	33	1	-	-	7	1	-	-	-	-
MIE	1	-	21	-	-	-	18	1	-	-	-	-
SHIGA	-	-	12	-	-	-	14	4	-	-	-	-
KYOTO	4	-	88	2	5	1	38	6	-	-	-	-
OSAKA	1	-	26	-	7	2	70	11	-	-	-	-
HYOGO	4	-	28	-	6	2	40	14	-	-	-	-
NARA	4	-	4	-	-	-	4	-	-	-	-	-
WAKAYAMA	-	-	6	-	-	-	5	3	-	-	-	-
TOTTORI	-	-	5	-	1	-	13	5	-	-	-	-
SHIMANE	-	-	20	-	1	1	4	2	-	-	-	-
OKAYAMA	4	-	13	-	-	-	5	2	-	-	-	-
HIROSHIMA	-	-	8	1	3	1	37	11	-	-	1	1
YAMAGUCHI	-	-	8	-	4	2	21	5	-	-	-	-
TOKUSHIMA	-	-	3	-	-	-	6	1	-	-	-	-
KAGAWA	-	-	9	2	2	-	10	2	-	-	-	-
EHIME	-	-	10	-	2	1	18	9	-	-	-	1
KOCHI	-	-	4	-	1	1	11	3	-	-	-	-
FUKUOKA	-	-	6	1	3	2	49	31	-	-	-	-
SAGA	-	-	1	-	-	-	9	4	-	-	-	-
NAGASAKI	-	-	10	-	3	3	17	9	-	-	-	-
KUMAMOTO	-	-	3	-	-	-	20	5	-	-	-	-
OITA	-	-	-	-	1	-	7	1	-	-	-	-
MIYAZAKI	1	-	6	-	-	-	6	-	-	-	-	-
KAGOSHIMA	-	-	2	-	2	2	23	7	-	-	-	-
TOTAL	124	2	1025	25	127	49	2012	600	0	0	1	2

RATE

Current	8.8	0.1	3.7	0.1	9.1	3.5	7.2	2.1	0.0	0.0	0.004	0.01
Previous	5.3	0.1			8.2	4.1			0.0	0.0		

Rates per 100,000 per annum

Plague: 0

SUMMARY REPORT OF CASES AND DEATHS FROM
COMMUNICABLE DISEASES IN JAPAN
WEEK ENDING 17 MAY 1947

PREFECTURE	MEASLES		WHOOPIING COUGH		TUBERCULOSIS	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	617	14	258	1	946	22
AOMORI	23	NR	31	NR	131	NR
IWATE	54	NR	49	NR	36	NR
MIYAGI	146	NR	102	NR	-	NR
AKITA	24	1	12	-	207	19
YAMAGATA	79	2	96	1	212	19
FUKUSHIMA	470	9	148	2	256	26
IBARAKI	292	12	161	5	126	8
TOCHIGI	183	4	55	1	112	-
GUMMA	213	-	102	-	193	-
SAITAMA	129	-	70	-	116	2
CHIBA	47	NR	22	NR	95	NR
TOKYO	471	NR	406	NR	647	NR
KANAGAWA	654	NR	278	NR	324	NR
NIIGATA	46	NR	37	NR	162	NR
TOYAMA	305	-	49	-	200	5
ISHIKAWA	NR	NR	NR	NR	NR	NR
FUKUI	49	-	57	-	131	-
YAMANASHI	NR	NR	NR	NR	NR	NR
NAGANO	267	-	117	-	287	5
GIFU	99	-	99	-	71	-
SHIZUOKA	254	1	193	4	208	16
AICHI	431	NR	161	NR	352	NR
MIE	318	-	172	-	88	8
SHIGA	153	NR	71	NR	94	NR
KYOTO	NR	NR	NR	NR	NR	NR
OSAKA	653	-	219	3	525	-
HYOGO	526	-	216	-	411	-
NARA	12	-	1	-	7	1
WAKAYAMA	19	-	29	-	56	3
TOTTORI	44	NR	33	NR	113	NR
SHIMANE	157	NR	113	NR	319	NR
OKAYAMA	NR	NR	NR	NR	NR	NR
HIROSHIMA	123	NR	333	NR	467	NR
YAMAGUCHI	41	-	16	-	64	8
TOKUSHIMA	96	-	174	-	125	15
KAGAWA	62	NR	69	NR	140	NR
EHIME	227	NR	231	NR	296	NR
KOCHI	NR	NR	NR	NR	NR	NR
FUKUOKA	651	7	343	8	611	147
SAGA	210	NR	62	NR	33	NR
NAGASAKI	88	NR	37	NR	55	NR
KUMAMOTO	140	-	87	-	104	3
OITA	145	-	57	-	167	-
MIYAZAKI	NR	NR	NR	NR	NR	NR
KAGOSHIMA	52	NR	79	NR	113	NR
TOTAL	8570	50	4845	25	8600	307
RATE						
Current	611.2	3.6	345.5	1.8	613.4	21.9
Previous	613.3	5.1	348.9	2.9	613.6	45.1

Rates per 100,000 population per annum
Cumulative totals not available.

Weekly Report - 17 May 1947
Continued

PREFECTURE	PNEUMONIA		INFLUENZA	
	Cases	Deaths	Cases	Deaths
HOKKAIDO	784	33	60	-
AOMORI	54	NR	-	NR
IWATE	98	NR	-	NR
MIYAGI	248	NR	9	NR
AKITA	64	7	-	-
YAMAGATA	136	15	-	-
FUKUSHIMA	306	16	4	-
IBARAKI	190	7	3	-
TOCHIGI	92	-	-	-
GUMMA	182	-	6	-
SAITAMA	106	4	1	-
CHIBA	32	NR	-	NR
TOKYO	299	NR	15	NR
KANAGAWA	310	NR	5	NR
NIIGATA	150	NR	12	NR
TOYAMA	106	3	1	-
ISHIKAWA	NR	NR	NR	NR
FUKUI	76	-	23	-
YAMANASHI	NR	NR	NR	NR
NAGANO	181	4	10	-
GIFU	99	-	-	-
SHIZUOKA	129	14	-	-
AICHI	181	NR	-	NR
MIE	112	5	-	-
SHIGA	62	NR	-	NR
KYOTO	NR	NR	NR	NR
OSAKA	188	-	6	-
HYOGO	170	-	2	-
NARA	5	-	-	-
WAKAYAMA	41	1	5	-
TOTTORI	36	NR	-	NR
SHIMANE	117	NR	4	NR
OKAYAMA	NR	NR	NR	NR
HIROSHIMA	211	NR	-	NR
YAMAGUCHI	30	6	-	-
TOKUSHIMA	59	-	14	-
LAGAWA	48	NR	5	NR
EHIME	194	NR	8	NR
KOCHI	NR	NR	NR	NR
FUKUOKA	295	72	100	1
SAGA	74	NR	-	NR
NAGASAKI	43	NR	-	NR
KUMAMOTO	65	-	-	-
OITA	183	-	34	1
MIYAZAKI	NR	NR	NR	NR
KAGOSHIMA	90	NR	-	NR
TOTAL	5846	187	327	2
RATE				
Current	416.9	13.3	23.3	0.1
Previous	443.1	27.9	24.2	0.8
Rates per 100,000 per annum				

WEEK ENDING 17 MAY 1947

(T) Total cases for year to date

RATE						
Current	71.0	57.0	383.7	261.8	242.1	177.3
Previous	58.8		319.7		238.7	
Rates per 100,000 per annum						

NUMBER OF CASES AND DEATHS OF COMMUNICABLE DISEASES
FOR COMPARABLE PERIODS, 1946 and 1947

Diseases	<u>Week Ending</u>		<u>Four Weeks Ending</u>		<u>Cumulative Number</u>	
	<u>17 May</u> 1947	<u>18 May</u> 1946	<u>17 May</u> 1947	<u>18 May</u> 1946	<u>for first 20 weeks</u> 1947	<u>1946</u>
Cases						
Diphtheria	679	912	2502	3508	13818	22631
Dysentery	198	267	592	874	1666	1777
Typhoid	359	640	950	3145	4220	15728
Paratyphoid	84	129	246	597	1055	2210
Smallpox	23	383	74	2152	301	16171
Typhus Fever	23	752	80	6817	695	25705
Malaria	238	NA	724	NA	3505	NA
Cholera	0	2	0	2	0	4
Scarlet Fever	124	57	288	198	1025	771
Epidemic Meningitis	127	37	441	152	2012	691
Jap. B. Encephalitis	0	NA	0	NA	1	NA
Plague	0	0	0	0	0	0
Deaths						
Diphtheria	56	49	197	214	1325	2172
Dysentery	38	45	102	136	341	448
Typhoid	36	94	114	381	551	2137
Paratyphoid	2	9	11	46	62	129
Smallpox	0	139	5	475	30	2312
Typhus Fever	8	139	13	585	61	2069
Malaria	0	NA	3	NA	13	NA
Cholera	0	0	0	0	0	0
Scarlet Fever	2	2	5	13	25	66
Epidemic Meningitis	49	9	180	32	600	164
Jap. B. Encephalitis	0	NA	0	NA	2	NA
Plague	0	0	0	0	0	0
NA: Not Available						

CASE AND DEATH RATES OF COMMUNICABLE DISEASES
FOR COMPARABLE PERIODS, 1946 AND 1947

Diseases	<u>Week Ending</u>		<u>Four Weeks Ending</u>		<u>Cumulative NO.</u>	
	<u>17 May</u> 1947	<u>18 May</u> 1946	<u>17 May</u> 1947	<u>18 May</u> 1946	<u>for First 20 Weeks</u> 1947	<u>1946</u>
Case Rate						
Diphtheria	48.4	65.0	44.6	62.5	49.3	80.7
Dysentery	14.1	19.0	10.6	15.6	5.9	6.3
Typhoid	25.6	45.6	16.9	56.1	15.0	56.1
Paratyphoid	6.0	9.2	4.4	10.6	3.8	7.9
Smallpox	1.6	27.3	1.3	38.4	1.1	57.7
Typhus Fever	1.6	53.6	1.4	121.5	2.5	91.7
Malaria	17.0	NA	12.9	NA	12.5	NA
Cholera	0.0	0.1	0.0	0.04	0.0	0.01
Scarlet Fever	8.8	4.1	5.1	3.5	3.7	2.7
Epidemic Meningitis	9.1	2.6	7.9	2.7	7.2	2.5
Jap. B. Encephalitis	0.0	NA	0.0	NA	0.004	NA
Plague	0.0	0.0	0.0	0.0	0.0	0.0
Death Rate						
Diphtheria	4.0	3.5	3.5	3.8	4.7	7.7
Dysentery	2.7	3.2	1.8	2.4	1.2	1.6
Typhoid	2.6	6.7	2.0	6.8	2.0	7.6
Paratyphoid	0.1	0.6	0.2	0.8	0.2	0.5
Smallpox	0.0	9.9	0.1	8.5	0.1	8.2
Typhus Fever	0.6	9.9	0.2	10.4	0.2	7.4
Malaria	0.0	NA	0.1	NA	0.05	NA
Cholera	0.0	0.0	0.0	0.0	0.0	0.0
Scarlet Fever	0.1	0.1	0.1	0.2	0.1	0.2
Epidemic Meningitis	3.5	0.6	3.2	0.6	2.1	0.6
Jap. B. Encephalitis	0.0	NA	0.0	NA	0.01	NA
Plague	0.0	0.0	0.0	0.0	0.0	0.0

NA: Not Available

Rates per 100,000 per population per annum

